



Application Data Sheet

Application Information

Application number::	10/665,974
Filing Date::	09/18/03
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R??::	
Number of CD disks::	
Number of copies of CDs::	
Sequence Submission::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	METHODS AND APPARATUS FOR TREATMENT OF PATENT FORAMEN OVALE
Attorney Docket Number::	022128-000300US
Request for Early Publication::	No
Request for Non-Publication::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	
Small Entity?::	Yes
Latin name::	
Variety denomination name::	
Petition included?::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers One::	
Secrecy Order in Parent Appl.::	No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: MARK
Middle Name:: E.
Family Name:: DEEM
Name Suffix::
City of Residence:: Mountain View
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 685 Sierra Avenue
City of Mailing Address:: Mountain View
State or Province of mailing address:: CA
Country of mailing address::
Postal or Zip Code of mailing address:: 94041

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: HANSON
Middle Name::
Family Name:: GIFFORD
Name Suffix:: III
City of Residence:: Woodside
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 3180 Woodside Rd.
City of Mailing Address:: Woodside
State or Province of mailing address:: CA
Country of mailing address::
Postal or Zip Code of mailing address:: 94062

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: WILLIAM
Middle Name::
Family Name:: MALECKI
Name Suffix::
City of Residence:: San Francisco
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 510 Clayton Street.
City of Mailing Address:: San Francisco
State or Province of mailing address:: CA
Country of mailing address::
Postal or Zip Code of mailing address:: 94117

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: KENNETH
Middle Name::
Family Name:: HORNE
Name Suffix::
City of Residence:: Palo Alto
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 926 Bautista Court
City of Mailing Address:: Palo Alto
State or Province of mailing address:: CA
Country of mailing address::
Postal or Zip Code of mailing address:: 94303

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An Appn claiming benefit under 35 USC 119(e) of	60/490,082	07/24/03
10/665,974	An Appn claiming benefit under 35 USC 119(e) of	60/478,035	06/11/03
10/665,974	An Appn claiming benefit under 35 USC 119(e) of	60/458,854	03/27/03

Foreign Priority Information

Country::	Application number::	Filing Date::
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Assignee Information

Assignee Name::	CIERRA, INC.
Street of mailing address::	604-D FIFTH AVE.
City of mailing address::	REDWOOD CITY
State or Province of mailing address::	CA
Country of mailing address::	USA
Postal or Zip Code of mailing address::	94063